



## Prior Authorization (PA) Numbers and Claim Submissions Tips

When submitting claims in MIHMS for services that require a PA, it is important to know when a PA number should be entered. When submitting electronic or paper claims, it is not always possible to enter PA numbers on the claim at a line level. See below for tips about how to submit each claim form.

### UB-04 Claims

- ✓ Electronic (837I) – Do not enter a PA number as there is no way to enter it at the line level.
- ✓ Paper – Do not enter a PA number as paper claims go through the 837I process after MaineCare processes them.
- ✓ Portal – PA numbers can be entered at the claim line level.

Most UB claims do not require a PA number on the claim because the system will automatically match the service and PA number through a custom designed process. If the services on the UB claim require more than one PA, add the appropriate PA number to each line by submitting the claim and then updating the claim in the Health PAS Online Portal. Psychiatric Residential Treatment Facility (PRTF) providers billing Room and Board code 0169 should not enter the PA number on the claim.

### CMS1500 Claims

- ✓ Electronic (837P) – Enter the PA number using Loop 2400 Segment REF at the claim line level in the 837P transaction for the service(s) that requires a PA.
- ✓ Paper – There is no place on paper claim forms to enter a PA number at the line level. Go to the Health PAS Online Portal to enter the PA number after the claim is in the system.
- ✓ Portal – Enter the PA number at the claim line level.

Leaving the PA number off the CMS1500 claim may speed up the claim processing time. The system automatically matches the service and the PA number through a custom designed process. If more than one PA is required, add the PA number to the appropriate service(s) at the line level either by submitting the claim electronically or via Direct Data Entry (DDE) on the Health PAS Online Portal.

### Dental Claims

- ✓ Electronic (837D) – Enter the PA number using Loop 2400 Segment REF at the claim line level in the 837D transaction for the service(s) that require a PA.
- ✓ Paper – There is no place on paper claim forms to enter a PA number at the line level. Go to the Health PAS Online Portal to enter the PA number after the claim is in the system.

- ✓ Portal – Enter the PA number at the claim line level.

Leaving the PA number off the dental claim may speed up the claim processing time. The system automatically matches the service and the PA number through a custom designed process. If more than one PA is required, add the PA number to the appropriate service(s) at the line level either by submitting the claim electronically or via Direct Data Entry (DDE) on the Health PAS Online Portal.

### **Scenarios When PA Numbers are Required at the Line Level**

- ✓ When providers have a PA to override Medically Unlikely Edits (MUE) edits.
- ✓ Out-Of-State (OOS) hospitals where the Place of Service (POS) is 11 on the claim line and the service is referencing an outpatient PA.
- ✓ If there are two PAs for same date of service, the system automatically chooses the most recent PA entered. This occurs for all claim submission methods when a PA is required at the line level.